# **Contingency Plan**

# Community College of Denver-Lowry Campus Facility Name

This plan is reviewed annually and amended whenever changes occur that will significantly affect the ability of this facility to respond to an emergency situation. This includes revision of the regulations, if the plan fails in an emergency, if this facility changes in a way that materially increases the potential for an emergency or changes in the response necessary in an emergency, if the list of emergency coordinators changes or if the list of emergency equipment changes. When warranted, revisions are made to the plan within 24 hours.

# Table of Contents

1. General Facility Information	1
2. Purpose and Scope of Plan	1
3. Overview of Facility Operations, Wastes, and Processes Generating Wastes	1
4. Emergency Response Coordinator	2
5. Coordinated Emergency Services with Off-Site Emergency Responders	2
6. Evacuation Plans	3
7. Location of 90-day and Satellite Accumulation Areas	3
8. Emergency Procedures and Responsibilities	4
9. Optional Components	
Appendix A - List of Emergency Response Team Members	7
Appendix B - List and Location of Emergency Equipment	
Appendix C - Fire Protection and Prevention Plan	
Appendix D – Description of Arrangements with Local Authorities	
Appendix E - Written Agreements with Local Responders	
Appendix F – Spill Response Contractor Responsibilities	
Appendix G – Evacuation Diagrams	
Appendix H – Accumulation/Storage Area Diagrams	
Appendix I - Hazard Analysis	
Attachments – Samples, Forms and Checklists	16

### **1. General Facility Information**

Community College of Denver - Lowry Campus		
Facility Name		
State of Colorado		
Facility Owner/Operator		
1070 Alton Way, #849 Denver, Colorado 80230		
Physical Address		
Denver		
County		
1070 Alton Way, #849 Denver, Colorado 80230		
Mailing Address		
303-365-8388	303-365-8396	
Facility Telephone Facility	FAX	
EPA Identification Number	SIC/NAICS Code	
Kevin Seiler	303-352-3053	
Contingency Plan Development and Maintenance	e Coordinator	Telephone

### 2. Purpose and Scope of Plan

Although this facility is designed, constructed, maintained and operated in a manner that minimizes the possibility for emergency incidents such as fire, explosions and any unplanned sudden or non-sudden release of hazardous waste or hazardous waste constituents to air, soil or surface water, this plan is designed to minimize hazards to human health and the environment in the unlikely event of such incidents. This plan is designed to satisfy the requirements of the Colorado Hazardous Waste Regulations (6 CCR 1007-3 Sections 262.34(a)(4) and 265.50-265.56) and the following regulations: NA

### **3.** Overview of Facility Operations, Wastes, and Processes Generating Wastes

Briefly describe what operations occur at your facility, then list the processes you have and what hazardous wastes are generated from each (for example: Corrosion protection and painting of replacement aircraft parts; conversion coating on aluminum – F019 sludge, painting operations – F005 spent lacquer thinner).

The Lowry Campus is part of the Community College of Denver and houses the College's health sciences programs. See the attached list of the chemicals used, storage, and disposal information at the Lowry campus.

### 4. Emergency Response Coordinator

At all times, there must be at least one employee either on the facility premises or on-call to respond to an emergency by coordinating all emergency response measures. The duties and responsibilities for emergency response are covered in **Section 8** of this plan.

The Emergency Response Coordinator (or alternate) has full authority to commit resources needed to respond to emergencies at this facility and to direct other trained employees to assist in the implementation of this contingency plan.

A list of emergency response coordinator(s), spill response team members (if designated) and first aid specialists (if designated) is included in **Appendix A**. A list of the available emergency equipment, its location and capabilities is included in **Appendix B**.

### 5. Coordinated Emergency Services with Off-Site Emergency Responders

Tom Wolf, Director of Security, 9101 East Lowry Boulevard, Denver Colorado 80230-6011 (720-858-2733) Name of Local Emergency Planning Committee (LEPC)<sup>1</sup>

This facility is not within an established fire protection district. We have developed our own fire protection and prevention plan based on the Uniform Fire Code, the National Fire Code, the Uniform Building Code and 29 CFR Chapter XVII, part 1910, subpart L, Fire Protection. This plan has been reviewed and approved by a registered professional engineer experienced in fire protection. The plan has also been approved by the Colorado Department of Public Health and Environment, Hazardous Materials and Waste Management Division and is included in **Appendix C**.

OR

This facility is within an established fire protection district. Denver Fire

Name of Fire Protection District

**Briefly describe arrangements** with the local fire department, police department, hospitals, response contractors, and/or State and local emergency response teams, including how to obtain assistance, what assistance will be provided, and designation of the primary emergency response authority. The table in **Appendix D** may substitute for a written description.

The Denver Fire Department performs regular inspections of the Lowry health sciences facilities which includes the fire extinguishers. Denver Fire is available via the 911 emergency system.

A list of LEPCs can be found at <u>http://www.cdphe.state.co.us/oeis/SARA/lepclist.html</u>.

The roles and responsibilities of internal and external responders should be defined and clarified by these agreements. Written agreements, if obtained, are included in **Appendix E**. If any State or local authorities declined to provide emergency response assistance, this has been documented in the facility operating record and may also be included in **Appendix E**.

This facility has contracted for the services of a spill response contractor.

Name of Spill Response Contractor

**Briefly describe arrangements** with the spill response contractor, including when to call for assistance, how to call for assistance and what response services will be provided. More detailed information may be provided in **Appendix F**.

Copies of this contingency plan and all revisions have been submitted to the response agencies referenced above and in Appendix D. A revision log is maintained in **Appendix D**.

### **6. Evacuation Plans**

Description of evacuation plans including signal(s) to be used, primary and secondary evacuation routes, and safe assembly areas (if designated). Facility diagrams with evacuation routes annotated may substitute for the written description and should be included in **Appendix G**.

All buildings are equipped with both pull type fire alarms and heat/smoke detectors. Emergency evacuation routes are posted in all rooms, building and hallways. Bi-yearly fire drills are conducted.

### 7. Location of 90-day and Satellite Accumulation Areas

The location of all (permanent and temporary) 90-day container and/or tank storage areas and satellite accumulation areas must be designated in the contingency plan. Facility diagrams with accumulation/storage areas annotated may be included in **Appendix H** or you may include a list of storage areas below (for example: Building 10, Room 19 – 90-day storage area; Room 32A - 3 satellite accumulation areas; Lab 11 - 1 satellite accumulation area).

There are no storage areas. The amounts of hazardous chemicals that are utilzied in the health sciences programs are minimal. Most are utilized are there is no need for disposal.

### 8. Emergency Procedures and Responsibilities

The Emergency Response Coordinator (or alternate) has full authority to commit resources needed to respond to emergencies at this facility and to direct other trained employees to assist in the implementation of this contingency plan.

Emergency Coordinator (or alternate):

- Be onsite or on-call at all times to coordinate emergency response activities;
- Be thoroughly familiar with this contingency plan, the operations and activities occurring at this facility, the physical layout of this facility, the location and characteristics of wastes generated, stored and/or managed onsite, and the location of all records necessary to implement this plan;
- In an imminent or actual emergency, immediately activate internal facility alarms or communications systems to alert facility personnel of the emergency;
- If appropriate, immediately notify spill response contractor with response roles as identified in Section 5 or Appendix F by calling \_\_\_\_\_;
- Immediately notify state and local emergency response agencies with response roles as identified in this plan;
- Immediately identify the biological, chemical and physical properties of any released material, the source of the release, the amount released, and the areal extent of the material;
- Immediately assess possible direct and indirect hazards to human health and the environment that may result from the incident and identify threatened resources and receptors;
- Determine if the incident could threaten human health or the environment outside the facility and if evacuation of local areas outside of the facility is required;
- Notify appropriate federal, state and local emergency reporting agencies:
  - National Response Center (1-800-424-8802);
  - Colorado 24-hour Incident Reporting Line (1-877-518-5608).
  - Local Emergency Planning Committee (LEPC<sup>2</sup>) Tom Wolf, Director of
  - O Security, 720-858-2733
  - 0 \_\_\_\_\_
  - 0
  - Reporting must include:
    - Name and telephone number of person reporting incident;
    - Name and address of facility;
    - Time and type of incident;
    - Name and quantity of material(s) involved, to the extent known;
    - Extent of injuries, if any;
    - Possible hazards to human health or environment outside the facility.
- Take all reasonable measures necessary to ensure that fires, explosions and releases do not occur, recur or spread:
  - Establish the objectives and priorities for response to the incident:
    - Determine mitigation actions;
    - Identify resources required for response;
    - Mobilize those resources;

<sup>&</sup>lt;sup>2</sup> A list of LEPCs can be found at <u>http://www.cdphe.state.co.us/oeis/SARA/lepclist.html</u>

 Stop processes and operations as necessary using the following criteria and procedures:

Stop and clean incidental spills immediately Stop leak. Warn others. Evacuate if needed. Notify Tom Wolf, Director of Security, as well as Denver Fire.

- Collect and contain released waste;
- Remove or isolate waste containers.
- If facility operations cease, monitor for leaks, pressure buildup, gas generation, or ruptures in valves, pipes and other equipment;
- Immediately after an emergency, provide cleanup, treatment, storage and/or disposal of recovered waste, contaminated soil or surface water, and other material that results from the incident by:

Use spill containment and cleanup materials located in the dispensary buildings 753 and 849.

- Ensure all wastes are managed and disposed of in accordance with federal, state and local requirements;
- Ensure that no waste incompatible with the released material is processed until cleanup procedures are completed;
- Ensure that all emergency equipment is cleaned and fit for its intended use before operations are resumed;
- Coordinate with federal, state and/or local regulatory agencies to determine that appropriate response actions have been successfully completed and terminate emergency response;
- Provide details of the incident to the Owner/Operator and notify them when emergency response has terminated and that all emergency equipment is ready for use;
- Director of Security Tom Wolf 720-858-2733
- CCD Dean of Health Sciences Stephanie Harrison 303-365-8388
- CCD Facilities Director Kevin Seiler 303-352-3053 or 720-235-2844

Owner/Operator Responsibilities:

- Notify the Colorado Department of Public Health and Environment, Hazardous Materials and Waste Management Division and appropriate local authorities that the facility has implemented the contingency plan and is in compliance with the requirements of the plan before operations are resumed;
- Record the time, date and details of the incident in the facility files;
- Submit a written report to the Colorado Department of Public Health and Environment, Hazardous Materials and Waste Management Division within 15 days of the incident that includes:
  - Name, address, and telephone number of the owner/operator;
  - Name, address, and telephone number of the facility;
  - Date, time and type of incident;
  - Name and quantity of material(s) involved;
  - Extent of injuries, if any;
  - Assessment of actual or potential hazards to human health or environment, if applicable;

- Estimated quantity and disposition of recovered material that resulted from the incident.
- •

Procedures to conduct a follow-up investigation of the cause of the incident include:

Notification of Kevin Seiler and Stephanie Harrison. They will meet with the head of the department where the spill occurred and discuss mitigation procedures. A report will be filed by Kevin Seiler and kept on file with Lowry Security as well as the Community College of Denver.

### 9. Optional Components

If this facility has conducted a pre-assessment for each potential hazardous waste, detailed hazard analysis information and a list of recommended actions is provided in **Appendix I**.

Spill Response Team Responsibilities:

- Be thoroughly familiar with the operations and activities occurring at this facility, the physical layout of this facility, the location and characteristics of wastes generated, stored and/or managed onsite, and the location, operation, capabilities and limitations of all spill response equipment;
- When instructed by the Emergency Response Coordinator or other designated authority, implement appropriate response actions to stop, contain and clean up spills and releases;
- Participate in periodic emergency response training;
- \_\_\_\_\_
- •

First Aid Specialists Responsibilities:

- Be thoroughly familiar with the characteristics of wastes generated, stored and/or managed onsite;
- Apply appropriate first aid to injured personnel;
- Participate in periodic first aid training;
- Tom Wolf and Stephanie Harrison are CPR and First Aide trained.
- •

### **Appendix A - List of Emergency Response Team Members**

Note: contact in order listed.

<b>Name</b> Kevin Seiler	Address 1111 W. Colfax Ave	<b>Phone (wk)</b> 303-352-3053	<b>Phone (hm or cell)</b> 720-235-2844
Primary Emergency	Response Coordinator (Re	quired)	
Tom Wolf	1070 Alton Way, #999	720-858-2733	
Alternate Emergence	y Response Coordinator 1		
Stephanie Harrison	1070 Alton Way, #849	303-365-8388	303-882-4268
Alternate Emergence	cy Response Coordinator 2		
Teri Higgins	1070 Alton Way, #849	303-365-8301	720-468-6034
Alternate Emergence	cy Response Coordinator 3		

Alternate Emergency Response Coordinator 4

### (Designation of spill response teams and first aid specialists is optional)

Name	Phone	
Stephanie Harrison	303-365-8388	
Spill Response Team Leade	er	
<u>Teri Higgins</u>	303-365-8301	
Alternate Spill Response Te	eam Leader 1	
Alternate Spill Response Te	eam Leader 2	

Spill Response Team Members

Name	Phone	
Stephanie Harrison	303-365-8388	
First Aid Specialist		
First Aid Specialist		
First Aid Specialist		

First Aid Specialist

Appendix Revision Date 10-01-2014

# Appendix B - List and Location of Emergency Equipment

This is an up-to-date list of all emergency response equipment at the facility. All equipment is tested and maintained as necessary to assure its proper operation in time of emergency. An extra sheet is attached if necessary.

Equipment	Location	Description	Capabilities and Limitations
Internal communications or alarm system	All rooms and hallways	Pull type alarms. Heat and smoke detectors. Phones in all classroom.	Linked to Denver Fire and Police and Lowry Security
External communications or alarm system	All rooms and hallways	Pull type alarms. Heat and smoke detectors. Phones in all classroom.	Linked to Denver Fire and Police and Lowry Security
Fire control equipment	All rooms and hallways are equipped with pull type alarms and sprinkler systems. Hand-held fire extinguishers. Dental hygiene clinic also	Ceiling mounted sprinkler system. Handheld fire extinguishers.	Hand-held fire extinguishers are regularly inspected by Denver Fire. Sprinkler system is inspected by installation company and Lowry Security.
Spill control equipment	Small kits located in each lab where chemicals are housed. Kitty litter in all labs.	Kits have the following: gloves, masks, safety glasses, brooms, sponges, dustpan, absorbant pads, band-aids, and kitty litter.	Sufficient to handle all spills that would occur at Lowry in the various labs.
Decontamination equipment	Same as spill control	Same as above	Sufficient to handle all spills that would occur at Lowry in the various labs.

### Appendix C - Fire Protection and Prevention Plan

This facility is within an established fire protection district.

OR

This facility is not within an established fire protection district. A copy of our approved fire protection and prevention plan is included in this Appendix C.

Primary Response Agency	Agency, Address, Plan Contact	Description of Assistance	How to Contact in an Emergency
Fire:	Denver Fire Department	Fire, emergency (all types), hazardous spills	911
Police:	Denver Police Department	Police and emergency assistance	911
LEPC:	Tom Wolf Lowry Security Chief Lowry Campus, #999	Local Emergency Planning Committee chief Local Emergency Coordinator	720-858-2733
Hospital:	University Hospital 13001 E. 17th Pl Aurora, CO 80045	All medical and emergency procedures	303-724-5000
Hospital:			
	Spill Response Contractor:		
	EPA Region 8		
	Colorado State Patrol HazMat		
Other:			
Other:			

### **Appendix D – Description of Arrangements with Local Authorities**

### **Revisions Summary**

Date Descrip	otion

Appendix Revision Date \_\_\_\_\_

### Appendix E - Written Agreements with Local Responders

This Appendix E may include written agreements with local emergency responders and documentation of any state or local authorities that declined to enter into such arrangements, if any.

### **Appendix F – Spill Response Contractor Responsibilities**

This Appendix F may contain a copy of the signed contract or other written agreement detailing the duties and responsibilities of the spill response contractor, how and when they should be contacted, how cleanup wastes will be managed and disposed, etc.

### **Appendix G – Evacuation Diagrams**

This Appendix G may contain copies of facility floor plans with evacuation routes annotated.

### Appendix H –Accumulation/Storage Area Diagrams

This Appendix H may contain copies of facility floor plans with all 90-day and satellite accumulation areas annotated.

### Appendix I - Hazard Analysis

This Appendix I may contain detailed hazard analysis information for each potential hazardous waste that could be generated during a spill or release incident along with a list of recommended actions and appropriate types of personal protective equipment (PPE).

### **Attachments – Samples, Forms and Checklists**

These examples can be modified to suit your specific needs. You may also prefer to develop your own site-specific call-down lists, forms or checklists.

- Example Letters Describing Arrangements with Local Authorities
- Emergency Coordinator Telephone Posting
- Emergency Coordinator Checklist
- 90-day Area Container Inspection Checklist
- 90-day Area Tank Inspection Checklist
- Satellite Accumulation Area Inspection Checklist

### Example Letters Describing Arrangements with Local Authorities 6 CCR 1007-3, section 265.52 (c), 265.37(a), 265.53(b) and 264.37(a) &265.37(a)

You are required to document that you have made agreements with the agencies that will respond to your facility in the event of an emergency. This includes hospitals, fire, police or sheriff, and other agencies that would be involved in a response. The Hazardous Materials and Waste Management Division (the Division) has found during inspections that many facilities do not have adequate arrangements or agreements with local emergency agencies as required by 6 CCR 1007-3, section 265.52(c). The following example letters are for your use. These letters must be customized to meet your particular facility's needs.

### Sample Emergency Agreement Letters

- A. Hospital
- B. Fire Department
- C. Police
- D. Local Health Department
- E. Emergency Authority to the Facility

### A. LQG EXAMPLE – HOSPITAL

\_\_\_\_Hospital Street

City, State, zip

Dear Sir or Madam:

This letter is written as a requirement of the Hazardous Waste Regulations adopted by the State Colorado. The purpose of this letter is to familiarize your hospital and staff with the properties of hazardous waste handled at the facility and the types of injuries or illnesses which could result from fires, explosions, or releases at the facility. *Name of Facility* is located at *Address of Facility*. As a result of the manufacturing process, hazardous waste is generated and stored at this facility. In accordance with 6 CCR 1007-3, section 265.52(c), this facility is providing your hospital with a copy of our Emergency Contingency Plan that describes:

- The actions our personnel will take in response to emergencies (e.g. fires, explosions, spills of hazardous waste, etc.).
- Arrangements <u>Name of Facility</u> would like your hospital to agree to in the event of an emergency.

In accordance with the requirements of 6 CCR 1007-3, section 265.37, the following information is also enclosed:

- A description of the properties of the hazardous waste handled at the facility. <u>Attach</u> <u>information or describe below</u>
- A description of the types of injuries or illnesses which could result from fires, explosions, or releases at the facility. <u>Attach information or describe below</u>

Finally, in accordance with the requirements of 6 CCR 1007-3, section 265.52(g), the Local Emergency Planning Committee is identified as: *identify the LEPC*\*.

Please review the enclosed Emergency Contingency Plan. If you agree to the arrangements, complete and return the enclosed form letter. If you do not agree with the arrangements or have questions, please call me at (XXX) XXXXXX.

Sincerely, XXXXXXXX

\* A list of LEPCs can be found at http://www.cdphe.state.co.us/oeis/SARA/lepclist.html.

### B. LQG EXAMPLE - Fire Dept.

Fire Dept.

Street City, State, zip

Dear Sir or Madam:

This letter is written as a requirement of the Hazardous Waste Regulations adopted by the State of Colorado. The purpose of this letter is to make arrangements to familiarize the fire department with the layout of the facility, properties and associated of hazardous waste handled at the facility, places where facility personnel would normally be working, entrances to roads inside the facility and possible evacuation routes. *Name of Facility* is located at *Address of Facility*. As a result of the manufacturing process, hazardous waste is generated and stored at this facility. In accordance with 6 CCR 1007-3, section 265.52(c), this facility is providing your agency with a copy of our Emergency Contingency Plan that describes:

- The actions our personnel will take in response to emergencies (e.g. fires, explosions, spills of hazardous waste, etc.).
- Arrangements (Name of Facility) would like your agency to agree to in the event of an emergency.
- A layout of the facility showing hazardous waste generation and storage areas, safety equipment, entrances to roads inside the facility and possible evacuation routes.
- A description of the properties and associated hazards of the hazardous wastes handled at our plant.

We are requesting that your agency provide the following services in the event of an emergency regarding hazardous waste storage at the facility:

• Describe the requested Fire Fighting Services. If more than one fire department might respond to an emergency, please include any agreements designating primary emergency authority to a specific fire department and agreements with any others to provide support to the primary emergency authority.

Finally, in accordance with the requirements of 6 CCR 1007-3, section 265.52(g), the Local Emergency Planning Committee is identified as : *identify the LEPC*\*.

Please review the enclosed Emergency Contingency Plan. If you agree to the arrangements, complete and return the enclosed form letter. If you do not agree with the arrangements or have questions, please call me at (XXX) XXXXXX.

Sincerely, XXXXXXXX

\* A list of LEPCs can be found at <u>http://www.cdphe.state.co.us/oeis/SARA/lepclist.html</u>.

### C. LQG EXAMPLE – Police

Police Dept.

Street City, State, zip

Dear Sir or Madam:

This letter is written as a requirement of the Hazardous Waste Regulations adopted by the State of Colorado. The purpose of this letter is to make arrangements to familiarize the police department with the layout of the facility, properties of hazardous waste handled at the facility and associated hazards, places where facility personnel would normally be working, entrances to roads inside the facility and possible evacuation routes. *Name of Facility* is located at *Address of Facility*. As a result of the manufacturing process, hazardous waste is generated and stored at this facility. In accordance with 6 CCR 1007-3, section 265.52(c), this facility is providing your agency with a copy of our Emergency Contingency Plan that describes:

- The actions our personnel will take in response to emergencies (e.g. fires, explosions, spills of hazardous waste, etc.).
- Arrangements (Name of Facility) would like your agency to agree to in the event of an emergency.
- A layout of the facility showing hazardous waste generation and storage areas, safety equipment, entrances to roads inside the facility and possible evacuation routes.
- A description of the properties and associated hazards of the hazardous wastes handled at our plant.

We are requesting that your agency provide the following services in the event of an emergency regarding hazardous waste storage at the facility:

• Describe the requested Law Enforcement Services. (If more than one police department might respond to an emergency, please include any agreements designating primary emergency authority to a specific police department and agreements with any others to provide support to the primary emergency authority).

Finally, in accordance with the requirements of 6 CCR 1007-3, section 265.52(g), the Local Emergency Planning Committee is identified as : *identify the LEPC*\*.

Please review the enclosed Emergency Contingency Plan. If you agree to the arrangements, complete and return the enclosed form letter. If you do not agree with the arrangements or have questions, please call me at (XXX) XXXXXX.

### Sincerely, XXXXXXXX

\* A list of LEPCs can be found at <u>http://www.cdphe.state.co.us/oeis/SARA/lepclist.html</u>.

### D. LQG EXAMPLE – Local Health Department

Local Health Department Street City, State, zip

Dear Sir or Madam:

This letter is written as a requirement of the Hazardous Waste Regulations adopted by the State Colorado. The purpose of this letter is to make arrangements to familiarize the local health department with the layout of the facility, properties of hazardous waste handled at the facility and associated hazards, places where facility personnel would normally be working, entrances to roads inside the facility and possible evacuation routes. *Name of Facility* is located at *Address of Facility*. As a result of the manufacturing process, hazardous waste is generated and stored at this facility. In accordance with 6 CCR 1007-3, section 265.52(c), this facility is providing your agency with a copy of our Emergency Contingency Plan that describes:

- The actions our personnel will take in response to emergencies (e.g. fires, explosions, spills of hazardous waste, etc.).
- Arrangements our facility has made with the local hospital, fire department and police department in which they will agree to perform in the event of an emergency.
- A layout of the facility showing hazardous waste generation and storage areas, safety equipment, entrances and roads inside the facility and evacuation routes.
- A description of the properties and associated hazards of the hazardous wastes handled at our plant.

Finally, in accordance with the requirements of 6 CCR 1007-3, section 265.52(g), the Local Emergency Planning Committee is identified as : *identify the LEPC\**.

Please review the enclosed Emergency Contingency Plan. If you agree to the arrangements, complete and return the enclosed form letter. If you do not agree with the arrangements or have questions, please call me at (XXX) XXXXXX.

Sincerely, XXXXXXXX

\* A list of LEPCs can be found at http://www.cdphe.state.co.us/oeis/SARA/lepclist.html.

### E. LQG EXAMPLE – Response Letter from Emergency Authority to Facility

Facility Street City, State, zip

Attention: XXXX, Primary Emergency Coordinator

Subject: Arrangements Response and Contingency Plan

Dear XXXX:

I have received the Emergency Contingency Plan submitted by <u>Name of Facility</u> to this office concerning hazardous waste generated and stored at your facility. Our agency agrees to, and is ready to provide services indicated in this plan. I am also aware of the types of hazardous wastes generated and stored at the facility and the possible hazards associated with such materials, as described in the contingency plan.

.

Sincerely, <u>Your name</u> Your agency or authority

	EMERGENC	Y COORDINATORS LIST AND TELEP (Supersedes all previously-dated lists)	EMERGENCY COORDINATORS LIST AND TELEPHONE POSTING (Supersedes all previously-dated lists) Date: 10-01-2014
		Tel	Telephones
Name & Home Address	Iress	work home	or cell/pager Comments
PRIMARY: Kevin Seiler	1111 W. Colfax Ave	303-352-3053	720-235-2844
ALTERNATES (NG Tom Wolf	ALTERNATES (Note: contact in order listed): Tom Wolf 1070 Alton Way, #999	720-858-2733	
Stephanie Harrison	1070 Alton Way, #849	303-365-8388	303-882-4268
Teri Higgins	1070 Alton Way, #849	303-365-8301	720-468-6034
FIRE DEPARTMENT:	NT: 911	COLORADO 24-HOUR	COLORADO 24-HOUR INCIDENT REPORTING LINE: 1-877-518-5608
POLICE DEPARTMENT: 911	MENT: 911	NATIONAL RESPONSE CENTER:	E CENTER: 1-800-424-8802
HOSPITAL: 303-724-5000	724-5000	SPILL RESPONSE CONTRACTOR:	NTRACTOR:
LOCATION OF EN	LOCATION OF EMERGENCY RESPONSE EQUIPMENT:	JIPMENT:	
Fire Extingu	Extinguishers: All rooms and hallways are equipped with pull type alarms and sprinkler systems.	are equipped with pull type als	larms and sprinkler systems.
Fire Alarm (	Fire Alarm (if present): All rooms and hallways	ays	
Spill Contro	I Equipment: Small kits locate	d in each lab where chemicals	Spill Control Equipment: Small kits located in each lab where chemicals are housed. Kitty litter in all labs.
Special Equi	Special Equipment (if present):		

# Emergency Coordinator Checklist (Large Quantity Generators)

- Are you thoroughly familiar with the operations and activities at your facility, the locations and characteristics of wastes handled at your facility, the physical layout of your facility, your Contingency Plan and the location of all records necessary to implement your Contingency Plan?
- In the event of an emergency:
  - o Did you activate the internal alarm or communication system to notify facility personnel?
  - o Did you notify appropriate emergency response agencies?
  - o Have you identified the character, exact source, amount and areal extent of released material?
  - o Have you assessed the possible direct and indirect hazards to human health or the environment that may result from the release, fire or explosion and actions taken to contain the event?
  - Have you determined if evacuation of local areas outside your facility is required? If so, have you notified either the local response agency onscene coordinator and/or the National Response Center (1-800-424-8802)?
  - o Have you taken all reasonable measures to ensure that fires, explosions, and releases do not occur, recur or spread to other hazardous waste at your facility?
  - o If facility operations were stopped, did you monitor for leaks, pressure buildups, gas generation or ruptures in valves, pipes or other equipment?
- Immediately after the emergency was under control:
  - o Did you provide for the treatment, storage and disposal of any contaminated material that resulted from the release, fire or explosion?

Next Page

~~~~~~~~~~

4/04

- o Did you make sure that wastes that may be incompatible with materials released during the emergency haven't been treated, stored or disposed of until your facility was completely cleaned up?
- o Did you make sure that all emergency equipment was cleaned and ready for use before resuming facility operations?
- Have you informed the owner or operator of your facility that the facility has been cleaned up and all emergency equipment is ready for use so that they can notify the Colorado Department of Public Health and Environment and other local authorities that the facility is back in compliance and normal operations have resumed?
- Have you provided appropriate information to the owner or operator of your facility so that they can note the time, date and details of the incident in the operating record and send a written report on the incident to the Colorado Department of Public Health and Environment?

4/04

- Are all accumulation/storage containers marked with the words "Hazardous Waste"?
- Is each container clearly marked with the accumulation start date the date waste was first placed in the container?
  - o Are all of the container accumulation start dates less than 90 days ago?
- Have you conducted weekly inspections of the waste accumulation containers looking for leaks or deterioration? (complete the weekly inspection log)
  - o Are all containers in good condition and not leaking?
  - o Are all containers kept closed except when waste is being added or removed?
  - o Are all containers stored in a manner to prevent rupture or leakage?
  - o Is the waste compatible with the type of container it is store in and won't cause it to rupture, leak or corrode?
  - o Are wastes that could react together kept separated by a dike, berm, or wall?
  - o Do you have adequate aisle space around the containers to allow unobstructed movement of emergency response personnel and equipment?
- If any containers hold more than 26 gallons of wastes with organic concentrations greater than 500 parts per million by weight, are you meeting the requirements of 6 CCR 1007-3 Part 265 Subpart CC? Note: Subpart CC requirements only apply to containers in the 90-day area, not those in a satellite accumulation area.

~~~~~~~~~~~~

Weekly Container Inspection Log	on Log	Sheet (LQG)	(FQG)		Month	Year
Record any problems noted; document how they were corrected and the date of correction. Attach extra sheet if necessary.	it how they	were corr	rected and	the date of	<sup>c</sup> correction. Attach extra s	theet if necessary.
Week	~	2	ო	4	Comments	ents
Labeled "Hazardous Waste"						
Accumulation Start Date Marked						
Start Date <90 Days Ago						
Good Condition/Not Leaking						
Kept Closed						
Stored to Prevent Rupture/Leakage						
Waste Compatible With Container						
Incompatible Wastes Separated						
Adequate Aisle Space						
Comply With Subpart CC, if applicable						
Your Initials						

Colorado Department of Public Health and Environment

# 90 Day Waste Tank Checklist (Large Quantity Generators)

- Is the tank marked with the words "Hazardous Waste"?
- Is the accumulation start date clearly marked on or attached to the tank, or recorded on a tank log sheet maintained at your facility?
- Has the tank held waste for < 90 days since the last time it was emptied?
  - Have you clearly marked the accumulation start date on the tank or on a log sheet that is available for inspection?
- Do the tank and piping have secondary containment?
- Have you conducted daily inspections of the tank looking for leaks or deterioration? Note: "Daily inspection" means any day that waste is in the tank, not just days the facility is in operation.
  - o Is the tank in good condition and not leaking?
  - o Is the tank maintained in a manner to prevent rupture or leakage?
  - Is the waste compatible with the type of tank it is stored in and won't cause it to rupture, leak or corrode?
  - o Are incompatible wastes kept separated by a dike, berm, or wall?
  - Do you have adequate aisle space around the tank to allow unobstructed movement of emergency response personnel and equipment?
- Have you conducted daily inspections of the level of waste in the tank and data gathered from tank monitoring equipment, and made sure that overflow prevention control equipment is working?
  - If waste is continuously fed into the tank, is the waste feed cutoff or bypass system working?

Are you meeting the requirements of 6 CCR 1007-3 Part 265 Subpart BB? Note: Applies only if the waste in the tank contains greater than 10 weight percent organics and contacts equipment for greater than 300 hours. Next Page

- Are you meeting the requirements of 6 CCR 1007-3 Part 265 Subpart CC? Note: Applies only if the tank holds wastes with organic concentrations greater than 500 parts per million by weight.
- Have you conducted a tank integrity assessment on new tanks installed after September 30, 1988?
- Have you conducted an annual inspection of the cathodic protection system, if present?
- Have you documented your inspection? (complete the daily inspection log sheet or other required records)

Colorado Department of Public Health and Environment

~~~~~~~~~~~~~~~~~~

| "Dally Lank Inspection Log Sheet (LdG)<br>"Dally inspection" means any day that wrete is in the tank not furst days the facility is in charaction | ؟<br>^* |          |      |                |             |          |   | • | <u>ء</u> . | in the to | 4 | ء<br>د |    | ر<br>+ د | 0/10 | ¢4 | for | ilitv. |    |                     | or o | 2 |    |    |    |    |    |    |        |
|---------------------------------------------------------------------------------------------------------------------------------------------------|---------|----------|------|----------------|-------------|----------|---|---|------------|-----------|---|--------|----|----------|------|----|-----|--------|----|---------------------|------|---|----|----|----|----|----|----|--------|
| Day                                                                                                                                               | -       | 2        | 3 00 | 2 <del>4</del> | 2<br>2<br>2 | <b>6</b> | 7 | 0 | 6          | 10        | 1 | 12     | 13 | 14       | 15   | 1  | 11  | 18     | 19 | <mark>5</mark><br>- | 21   | 5 | 23 | 24 | 25 | 26 | 27 | 28 | <br>29 |
| Labeled<br>"Hazardous<br>Waste"                                                                                                                   |         |          |      |                |             |          |   |   |            |           |   |        |    |          |      |    |     |        |    |                     |      |   |    |    |    |    |    |    |        |
| Start Date <90<br>Days Ago                                                                                                                        |         |          |      |                |             |          |   |   |            |           |   |        |    |          |      |    |     |        |    |                     |      |   |    |    |    |    |    |    |        |
| Accumulation<br>Start Date<br>Marked on Tank<br>or Log Sheet                                                                                      |         |          |      |                |             |          |   |   |            |           |   |        |    |          |      |    |     |        |    |                     |      |   |    |    |    |    |    |    |        |
| Secondary<br>Containment                                                                                                                          |         | <u> </u> |      |                |             |          |   |   |            |           |   |        |    |          |      |    |     |        |    |                     |      |   |    |    |    |    |    |    |        |
| Good<br>Condition/Not<br>Leaking                                                                                                                  |         |          |      |                |             |          |   |   |            |           |   |        |    |          |      |    |     |        |    |                     |      |   |    |    |    |    |    |    |        |
| Stored to<br>Prevent<br>Rupture/Leakage                                                                                                           |         |          |      |                |             |          |   |   |            |           |   |        |    |          |      |    |     |        |    |                     |      |   |    |    |    |    |    |    |        |
| Waste<br>Compatible With<br>Tank                                                                                                                  |         |          |      |                |             |          |   |   |            |           |   |        |    |          |      |    |     |        |    |                     |      |   |    |    |    |    |    |    |        |
| Incompatible<br>Wastes<br>Separated                                                                                                               |         |          |      |                |             |          |   |   |            |           |   |        |    |          |      |    |     |        |    |                     |      |   |    |    |    |    |    |    |        |
| Adequate Aisle<br>Space                                                                                                                           |         |          |      |                |             |          |   |   |            |           |   |        |    |          |      |    |     |        |    |                     |      |   |    |    |    |    |    |    |        |
| Cutoff or Bypass<br>System Working                                                                                                                |         | <u> </u> |      |                |             |          |   |   |            |           |   |        |    |          |      |    |     |        |    |                     |      |   |    |    |    |    |    |    |        |
| Comply With<br>Subpart BB and<br>CC, if applicable                                                                                                |         |          |      |                |             |          |   |   |            |           |   |        |    |          |      |    |     |        |    |                     |      |   |    |    |    |    |    |    |        |
| Your Initials                                                                                                                                     |         |          |      |                |             |          |   |   |            |           |   |        |    |          |      |    |     |        |    |                     |      |   |    |    |    |    |    |    |        |

|  | SS |  |  | ith | age |  |  | Υ |  |  | Comments |  | WasterStart Date <90Days AgoDays AgoAccumulationStart DateMarked on Tankor Log SheetMarked on Tankor Log SheetMarked on Tankor Log SheetMarked on TankContainmentGoodContainmentGoodContainmentGoodContainmentGoodContainmentGoodContainmentGoodCondition/NotLeakingStored toPreventWasteWasteVastesSeparatedAdequate AisleSystem WorkingComply WithSubpart BB andCC, if applicableCutoff or BylicableCutoff or BylicableSubpart BB andCutoff or BylicableSubpart BBSubpart BBSubpart BBSubpart BBSubpart BB |
|--|----|--|--|-----|-----|--|--|---|--|--|----------|--|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
|--|----|--|--|-----|-----|--|--|---|--|--|----------|--|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

# Satellite Accumulation Area **Inspection Checklist** (Large Quantity Generators)

- Is the total amount of waste stored in this area less than 55 gallons of hazardous waste or one quart of acutely hazardous waste?
- Is the satellite accumulation area at or near the point of generation with nothing that might interfere with the transportation of waste to the satellite area?
- Is the area under the control of the operator of the process generating the waste, either visually or under lock and key?
- Is the satellite accumulation container marked with the words "Hazardous Waste' or other words to identify the contents of the container?
- Have you conducted weekly inspections of the waste accumulation container **looking for leaks or deterioration?** (complete the weekly inspection log)
  - o Is the container in good condition and not leaking?
  - o Is the container kept closed except when waste is being added or removed?
  - o Is the container stored in a manner to prevent rupture or leakage?
  - o Is the waste compatible with the type of container it is stored in and won't cause it to rupture, leak or corrode?
  - o Are wastes that could react together kept separated by a dike, berm, or wall?
  - o If the container holds ignitable or reactive waste, is it located at least 50 feet from the facility property line?
  - Is there adequate aisle space around the container to allow unobstructed movement of emergency response personnel and equipment?
- Is the container clearly marked with the accumulation start date as soon as (within minutes) the level of 55 gallons of hazardous waste or one quart of acutely hazardous waste is met?
  - Ensure the dated container is moved to the 90 day accumulation storage area within 24 hours.
- Is the current location of the satellite accumulation area recorded in the facility contingency plan?

| Week                                                                                            | <b>~</b> | 2 | က | 4 | Comments |
|-------------------------------------------------------------------------------------------------|----------|---|---|---|----------|
| <55 Gallons in Satellite<br>Accumulation Area                                                   |          |   |   |   |          |
| Contents of Container Labeled                                                                   |          |   |   |   |          |
| Good Condition/Not Leaking                                                                      |          |   |   |   |          |
| Kept Closed                                                                                     |          |   |   |   |          |
| Stored to Prevent Rupture/Leakage                                                               |          |   |   |   |          |
| Waste Compatible With Container                                                                 |          |   |   |   |          |
| Incompatible Wastes Separated                                                                   |          |   |   |   |          |
| Ignitable/Reactive Wastes Stored >50' From Property Line                                        |          |   |   |   |          |
| Adequate Aisle Space                                                                            |          |   |   |   |          |
| Accumulation Start Date Marked<br>and Container Moved to 90-day<br>Area When Full – Check Daily |          |   |   |   |          |
| Your Initials                                                                                   |          |   |   |   |          |

5/09